

RISK FACTORS

If risk factors are present then the hearing should be monitored every six months until the age of three years

- Parental or caregiver concern regarding hearing, speech, language and /or developmental delay
- Family history of permanent childhood hearing loss
- Stigmata or findings associated with syndromes including sensorineural or conductive hearing loss or Eustachian Tube dysfunction
- Postnatal infections associated with sensorineural hearing loss including bacterial meningitis
- In utero infections such as cytomegalovirus, herpes, rubella, syphilis and toxoplasmosis
- Neonatal indicators, specifically hyperbilirubinemia, persistent pulmonary hypertension associated with mechanical ventilation and conditions requiring the use of extracorporeal oxygenation (ECMO)
- Syndromes associated with progressive hearing loss such as neurofibromatosis, osteopetrosis and Usher's syndrome
- Neurodegenerative disorders i.e. Hunter syndrome or sensory motor neuropathies i.e. Friedreich's ataxia, Charco-Marie-Tooth syndrome
- Head trauma
- Recurrent or persistent otitis media with effusion for at least 3 months